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30448 7596 09/02/2009 AKERMAN SENTERFITT P.O. BOX 3188 WEST PALM BEACH, FL 33402-3188				Certificate of Mailing or Transmission I hereby certify that this Pec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
WEST PALM B	EACH, FL 33402	2-3188	aris eris	smitted to the USPTO	(\$71) 273-2885, on the	date indicated below.
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APPLICATION NO.	FELING DAT	ric C	FIRST NAMED INVENTOR	AT	TORMEY DOCKET NO.	CONFIRMATION NO.
10/597,889	08/10/200	6	Davide Lenzarini		9526-97 (192747)	7458
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APPEN TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FE	TOTAL PEE(S) DEE	DATE DUE
nonprovisional	YES	\$755	\$300	:50	\$1055	12/02/2009
EXAMINER		ART UNIT	CLASS-SUBCLASS			
WOO, KUO-KONG		2617	370-331000			
1. Change of correspondence address or indication of "Fee Address" [77] CFR 1.363). 2. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 2. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON			2. For printing on the patent front page, list (1) the names of up to 3 registered patent anomeys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3 issted, no name will be printed.			
PLEASE NOTE: Usi recordation as set first (A) NAME OF ASSI FOTWATE	ess an assignee is ide h in 37 CFR 1.11. Co GNEE. I Informatic		data will appear on the p off a substitute for filing an (B) RESIDENCE (CITY S SA SW	atent. If an assignee in sesignment. and STATE OR COU itzerland	NTRY)	oup entity Government
Advance Order - i	io small entity discour # of Copies	a permitted)	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit eard. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-6553 (eaclose an extra copy of this form).			
 Change in Entity Sta Applicant claim 		ated above) atus, See 37 CFR 1.27.	the Applicant is no lon	ger claiming SMALL I	INTTTY status, See 37 C	FR 1.27(e)(2).
NOTE. The Issue Fee an	d Publication Fee (if n		d fixen anyone other than t			he assignee or other party in
Authorized Signature	Art V	2004	2	Date	9-28-09 40,764	
Typed or printed name	Mark D	. Passler		Registration No.	40,764	
substituting the completes this form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	i application form to ous for reducing this irginia 22313-1450. I 13-1450.	CFR 1.311. The information of U.S.C. 122 and 37 CFR the USPTO. Time will vary pursien, should be sent to the EMO NOT SEND FIELS OR to persons are required to re-	of depending upon the indivi- tion of the complete comple	etain a benefit by the p imated to take 12 mini idual case. Any comm x, U.S. Paient and Trai D THIS ADDRESS. SP	ublic which is to file (an des to complete, includi- ents on the amount of ti- lemark Office, U.S. Dep (ND TO: Commissioner	d by the USFTO to process) ng gathering, preparing, and me you require to complete sariment of Commerce, P.O. for Patents, P.O. Box 1450,